#### PART B - FEE(S) TRANSMITTAL

Complete and send this form, to

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together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

/ 214.	\$		or <u>Fax</u>	(703) 746-4000		
INSTRUCTIONS This for appropriate. All here of or indicated unless corrected to	m Solid be used for transcription of the local state of the local stat	smitting the ISSU Patent, advance ord in Block I, by (a)	E FEE and PUBLI ders and notification specifying a new	CATION FEE (if requ n of maintenance fees v correspondence address;	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
maintenance fee notification	IS. E ADDRESS (Note: Use Block 1 for					<del></del>
	7590 10/01/2004			Fee(s) Transmittal. The papers. Each additions	mailing can only be used f is certificate cannot be used al paper, such as an assignm e of mailing or transmission.	for any other accompanying
TRASK BRITT				Cer	rtificate of Mailing or Tran	smission
P.O. BOX 2550				I hereby certify that the	nis Fee(s) Transmittal is bein	ng deposited with the United
SALT LAKE CITY 4/2005 SMINASS2 00000	7, UT 84110 0051 10008339			addressed to the Mai	with sufficient postage for fill Stop ISSUE FEE address TO (703) 746-4000, on the	date indicated below.
C:2501 700.00 OP				Rachael M	. Harris	(Depositor's name)
C:1504				Racha	O M. Har	(Signature)
:8001 30.00 OP				December	28, 2004	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/008,339 11/13/2001 Ja			James N. Herro	on	2424.4US	3715
TITLE OF INVENTION: APPARATUS AND METHODS FOR MULTI-ANALYTE HOMOGENEOUS FLUORO-IMMUNOASSAYS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685		\$300	\$985	01/03/2005
EXAMINER AI		ART UN	T (	CLASS-SUBCLASS		
CHIN, CHRISTOPHER L		1641	541 436-518000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
BioCentrex, LLC Culver City, CA						
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the patent)	: 🖵 Individual 🖾 C	orporation or other private g	roup entity Government
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):						
☑ Issue Fee ☑ A check in the amount of the fee(s) is enclosed.						
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of	Copies10		The Director is Deposit Account N	hereby authorized by clumber 20-1469	charge the required fee(s), or (enclose an extra	r credit any overpayment, to copy of this form).
5. Change in Entity Status	(from status indicated above	e)				
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	b. Applicant is	no longer claiming SMA	LL ENTITY status. See 37 (	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rece	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ue Fee and Publicat will not be accepted ent and Trademark	ion Fee (if any) or t I from anyone other Office.	o re-apply any previous than the applicant; a reg	ly paid issue fee to the applic sistered attorney or agent; or	cation identified above. the assignee or other party in
Authorized Signature	nick Xan	2			December 28, 20	**
Typed or printed name _	Brick G. Powe	r .		Registration	n No. 38,581	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

# In re Application of:

Herron et al.

Serial No.: 10/008,339

Filed: November 13, 2001

For: APPARATUS AND METHODS FOR MULTI ANALYTE HOMOGENEOUS FLUOROIMMUNOASSAYS (Amended)

Confirmation No.: 3715

Examiner: C. Chin

Group Art Unit: 1641

**Attorney Docket No.:** 0274.02-2424.4US

(U-2052)

**Notice of Allowance Mailed:** 

October 1, 2004

### CERTIFICATE OF MAILING

I hereby certify that this correspondence along with any attachments referred to or identified as being attached or enclosed is being deposited with the United States Postal Service as First Class Mail on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

December 28, 2004

Signature

Rachael M. Harris
Name (Type/Print)

# TRANSMITTAL LETTER

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicants submit herewith Part B - Fee(s) Transmittal for the above-captioned application and a check in the amount of \$1030.00 in payment therefor plus ten (10) copies of the patent when issued.

Applicants understand that no additional fees are required. However, if the Office determines that any comparison fees or other additional fees are required, the Commissioner is

authorized to charge any such fees to TraskBritt Deposit Account No. 20-1469. A copy of this Transmittal Letter is enclosed for deposit account charging purposes.

Respectfully submitted,

Brick G. Power

Registration No. 38,581 Attorney for Applicant(s)

TRASKBRITT P.O. Box 2550

Salt Lake City, Utah 84110-2550

Telephone: 801-532-1922

Date: December 28, 2004

BGP/djp:rmh

Enclosures: Part B - Issue Fee Transmittal

Check No. 21245 in the amount of \$1030.00

Copy of Transmittal Letter

Amendment Pursuant to 37 C.F.R. § 1.312

Document in ProLaw